



04-04-01

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Practitioner's Docket No. P563 US

PATENT

Preliminary Classification:  
Proposed Class:  
Subclass:



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Box Patent Application  
Assistant Commissioner for Patents  
Washington, D.C. 20231

## NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of

Inventor(s): Nareak Douk; Nasser Rafiee; David S. Brin; Peter G. Strickler

For (title): TEMPORARY INTRALUMINAL FILTER GUIDEWIRE AND METHOD OF USE

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**CERTIFICATION UNDER 37 C.F.R. SECTIONS 1.8(a) AND 1.10\***  
(When using Express Mail, the Express Mail label number is **mandatory**;  
Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

## MAILING

deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents,  
Washington, D.C. 20231.

37 C.F.R. Section 1.8(a)

37 C.F.R. Section 1.10\*

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## TRANSMISSION

transmitted by facsimile to the Patent and Trademark Office (703) \_\_\_\_\_.

Date: 3/30/01

Christine L. Aceves  
Signature

Christine L. Aceves  
(type or print name of person certifying)

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**1. Type of Application**

This transmittal is for an original (nonprovisional) application.

**2. Papers Enclosed**

A. Required for filing date under 37 C.F.R. 1.53(b) (Regular) or 37 C.F.R. 1.153 (Design)  
Application

13 Page(s) of Specification

10 Page(s) of Claims

10 Sheet(s) of Drawing(s)--Informal

**B. Other Papers Enclosed**

3 Page(s) of declaration and power of attorney

1 Page(s) of abstract

**3. Declaration or Oath**

Enclosed

Executed by:

\* inventors.

**4. Inventorship Statement**

The inventorship for all the claims in this application is the same.

**5. Language**

English

## **6. Fee Calculation (37 C.F.R. Section 1.16)**

## Regular Application

**CLAIMS AS FILED**

Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 CFR 1.16(a) \$710.00
Total Claims (37 CFR 1.16(c))	44	- 20 =	24 x	\$18.00	\$432.00
Independent Claims (37 CFR 1.16(b))	8	- 3 =	5 x	\$80.00	\$400.00
Multiple Dependent Claim(s), if any (37 CFR 1.16(d))			+ \$270.00	\$0.00	

## **7. Fee Payment Being Made at This Time**

**Enclosed** Filing Fee \$1,542.00

**Total Fees Enclosed** \$1,542.00

#### **8. Method of Payment of Fees**

Charge Account No. 01-2525 in the amount of \$1,542.00.  
A duplicate of this transmittal is attached.

#### **9. Instructions as to Overpayment**

Credit Account No. 01-2525.

Date: 3/30/01

Reg. No.: 34,472  
Tel. No.: 707-566-1746  
Customer No.: 28390

Willy T  
Signature of Practitioner

### Signature of Practitioner

Michael J. Jaro  
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